FROM THE NURSES' STANDPOINT

BY ANNIE E. KENNEDY Graduate City Hospital, Rochester, N. Y.

In the summer of 1897 I had assigned to me the care of the first milk station in Rochester. At that time the city did not have its own milk-farm, but had the milk furnished from a herd of cows which was under the supervision of the Health Department. This was brought to the station and prepared after a certain formulæ, either sterilized or Pasteurized (one of our nurses once wrote it "Pastorized," and when the staff doctor made the discovery he smilingly said, "Miss ——, this must be a clerical preperation"). In addition to the preparation of the milk, I was supposed to give advice to the mothers in regard to the care of the children, which was not always accepted in the spirit in which it was given. One father who came for advice, after listening to my instructions, coolly informed me that he had raised nineteen children, and probably knew more about their care than he could find out from me.

A mother was worried about her baby, who had cholera infantum, and when I asked her what she had fed it, she said, "Well, we give him a little of whatever we have," which I found out was pork sausage, sauer-kraut, bread, etc., and also that he was "very fond of beer."

Who could wonder that the child vomited and had bowel trouble?

At the close of the first season I had some misgivings as to the amount of good that had been accomplished, but on reopening the following year, 1898, found that the mothers had taken a deeper interest in the benefits of the station than I was aware of. For example, the percentage of children sweltering in woollen clothing in July was much less than during the first year, and bathing was more widely practised.

The same year the Health Department established three milk stations, and in 1899 added one. In 1900, 1901, and 1902 it seemed necessary to increase the number of stations to five in order to cover the territory where so many children were in need of the care. The work was interesting, and there were many amusing incidents to brighten the tedious hours.

In 1903 the Health Department of Rochester assumed control of the milk-farm, about three miles out of the city, where fifteen cows were kept. My duties consisted in superintending the cleanliness of the stables, cows, and men during the milking process. This necessitated my rising at four o'clock every morning, rain or shine. The strainers and all utensils used in the preparation of the milk for the sub-stations had to be sterilized and ready for use as soon as needed. About one hundred quarts of milk were sent out daily from this farm, in four-,

five-, seven-, and eight-ounce bottles. There was no small amount of bottle washing, in which I was ably assisted by "Nathan," my cheerful "right hand," who likewise proved my guardian by day.

When the labors of the day were ended I was usually glad enough to turn in to my tent, where, like Robinson Crusoe's, "my right there was none to dispute."

By my bedside on the table lay a loaded six-shooter, while outside the door reposed a huge black dog with a bark like a megaphone, but, let a peal of thunder or the report of a pistol arouse him, and he would be "absent, but not forgotten." No; it would be very hard to forget his cowardly acts.

A summer thus spent on the milk-farm, from July 1 to September 1, proved a pleasant and interesting diversion from the general routine of private nursing.

THE CARE OF THE BABY'S CORD

BY RUTH BREWSTER SHERMAN Graduate Nurse of the Johns Hopkins Hospital

To the graduate fresh from her training-school the treatment of the umbilical cord may seem a simple matter leading to an unvarying result. So, to a certain degree, it is; and in this case, as in all the rest of our work, we can say with the proverb, "Blessed is the nation which hath no annals;" but it will also often happen that a nurse who does much obstetrical work will find something new to learn about the cord from each baby under her care.

A very common dressing is the square of powdered linen with a hole in the centre. But with even the most careful sterilizing these will become slightly stiffened and the powder is apt to be lumpy or to collect in the folds of the linen. Much better results are obtained by powdering the whole stump of the cord thickly with sterile boric powder and wrapping it in sterilized absorbent cotton, padding well around the base and between the cord and the abdomen before the band is pinned on. This dressing stays in place better than the linen and is more comfortable against the skin; also, it better absorbs the natural moisture of the "jelly," as will be seen by an examination of the cotton on the first occasion of a change. To insure the sterility of the powder and avoid the necessity of handling it, a nurse who takes many obstetrical cases will find it helpful to carry with her a small glass or tin box with a